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23125 7590 06/03/2004

FREESCALE SEMICONDUCTOR, INC.
LAW DEPARTMENT
7700 WEST PARMER LANE MD:TX32/PL02
AUSTIN, TX 78729

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Pat Thomas	(Depositor's Name)
	(Signature)
	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/021,756	12/13/2001	Karl Mautz	SC0232WD	2253

TITLE OF INVENTION: METHOD AND APPARATUS FOR MEASURING A REQUIRED FEATURE OF A LAYER DURING A POLISHING PROCESS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	09/03/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
TURNER, SAMUEL A	2877	356-630000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Kim-Marie Vo
2 Patricia S. Goddard
3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

FREESCALE SEMICONDUCTOR, INC. AUSTIN, TX

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

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☒ Issue Fee☐ A check in the amount of the fee(s) is enclosed.☒ Publication Fee☐ Payment by credit card. Form PTO-2038 is attached.☐ Advance Order - # of Copies _____☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 503079 (enclose an extra copy of this form).

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(Authorized Signature)

(Date)

Kim-Marie Vo 50,714

Aug. 25, 2004

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**LAW DEPARTMENT
 FREESCALE SEMICONDUCTOR, INC., A MOTOROLA SUBSIDIARY**

DATE: August 25, 2004

TO: MS: ISSUE FEE (703) 305-8283
 (ADDRESSEE) (EXTENSION)

USPTO (703) 746-4000
 (LOCATION) (FAX NUMBER)

FROM: Pat Thomas for Kim-Marle Vo (512) 996-6839
 (SENDER) (EXTENSION)

TOTAL NUMBER OF PAGES 5 (including this page)

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 ERROR, PLEASE CALL: (512) 996-6839

Docket No.: SC0232WD
Applicant: Karl Mautz
Serial No.: 10/021,756
Art Unit: 2877
Filed: December 13, 2001
Class: 316-630000

ALL ITEMS MARKED WITH AN "X" ARE INCLUDED:

1.	x	1 page Facsimile Cover Sheet
2.	x	1 page PTOL-85B Issue Fee Transmittal (in duplicate)
3.	x	1 page Letter regarding IDS
4.	x	1 page Letter regarding Title

Paid by Deposit Account 503079, Freescale Semiconductor, Inc: \$1630

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ON: 8-25-04
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